

HC922 U.S. PRO  
09/705478

11/02/00

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| Class | Subclass |
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PATENT NUMBER

**U.S. UTILITY Patent Application**

**O.I.P.E.**

PATENT DATE

TR PD 4  
SCANNED Q.A.

## Q.A.

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| APPLICATION NO.<br>09/705478 | CONT/PRIOR | CLASS<br>-345 | SUBCLASS<br><u>336</u> | ART UNIT<br><u>2473</u><br><del>2673</del> | EXAMINER<br><u>J. CABELLA</u> |
|------------------------------|------------|---------------|------------------------|--|-------------------------------|

## APPLICANTS

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**TITLE**

Remote manual, maintenance, and diagnostic services for networked electronic devices

PTO-2040  
12/99

**ISSUING CLASSIFICATION**

[illegible]

|   |                                      |             |                                   |              |
|---|--------------------------------------|-------------|-----------------------------------|--------------|
| <input type="checkbox"/> <b>TERMINAL<br/>DISCLAIMER</b>   | <b>DRAWINGS</b>                      |             | <b>CLAIMS ALLOWED</b>             |              |
|   | Sheets Drwg.                         | Figs. Drwg. | Print Fig.                        | Total Claims |
| <input type="checkbox"/> The term of this patent<br>subsequent to _____ (date)<br>has been disclaimed.  | _____<br>(Assistant Examiner) (Date) |             | <b>NOTICE OF ALLOWANCE MAILED</b> |              |
|   |                                      |             |                                   |              |
| <input type="checkbox"/> The term of this patent shall<br>not extend beyond the expiration date<br>of U.S Patent. No. _____<br>_____<br>_____   |                                      |             | <b>ISSUE FEE</b>                  |              |
|   | Amount Due                           | Date Paid   |                                   |              |
| <input type="checkbox"/> The terminal ____ months of<br>this patent have been disclaimed.   | _____<br>(Primary Examiner) (Date)   |             | <b>ISSUE BATCH NUMBER</b>         |              |
|   |                                      |             |                                   |              |
| <input type="checkbox"/> _____<br>(Legal Instruments Examiner) (Date)   |                                      |             |                                   |              |
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